LOBBYIST MONTHLY REPORT FORM



State of Idaho

Ben Ysursa Secretary of State

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To Be Filed By:

LOBBYISTS (Sec. 67-6619) Page__ ___of___ Page(s) THIS SPACE FOR OFFICE USE ONLY

See instructions at bottom of page	
Lobbyist's name and permanent business address Date prepared Period covered	d
	onth ending
P. O. Box 953 Roise ID 83701 (Mo.) (Mo.)	Day) (Yr.)
Boise, 1D 03701	31 07
	31 07
Totals of all reportable expenditures made or incurred by Lobbyist's Employer on behalf of Lobbyist's land to the control of Lobbyist's land t	Employer.
Category of Expenditure Reimbursed Personal Living and Travel Expenses Pertaining to Lobbying Activity *Total Amount for All Employers *Total Amount for All Employers	
	nployer No. 4
Entertainment Food and Refreshment \$ 119.65 \$ 0.00 \$ 0.00 \$ 0.00 \$	119.65
Living Accommodations	
Advertising	
Travel	
Telephone	
Other Expenses or Services	
Total s 119.65 s 0.00 s 0.00 s 0.00 s	119.65
2 S S S S S S S S S S S S S S S S S S S	
*When the number of employers you are reporting for requires multiple L-2 forms to be filed a total amount for all employers should be en	ntered on Page 1.
The totals of each expenditure of more than fifty dollars (\$50) for a legislator, other holder of public office, and executive office. The totals of each expenditure of more than fifty dollars (\$50) for a legislator, other holder of public office, and executive office. Amount Names of Legislators, Public and Executive Office.	
OJEB STATS	
Continued on attached page(s)	
INSTRUCTIONS Item 3 Employer(s) Name(s) and Address((es)
Who should file this form: Any lobbyist registered under Section 67-6617 Idaho Code No. 1 Ada County Highway District 3775 Adams St., Garden City, ID 83714	4
Filing deadline: Monthly reports due within ten (10) days of the month for activities of the past month. No. 2 Associated Logging Contractors P. O. Box 671, Coeur d'Alene, ID 8381	6 🖪
TO BE FILED WITH:	
Ben Ysursa No. 3 Boise Orthopedic and Spine Hospital Secretary of State No. 3 Boise Orthopedic and Spine Hospital 600 N.Robbins Rd., Ste 401, Boise, ID	83702
PO Box 83720 Boise, ID 83720-0080 Phone: (208) 334-2852 Fax: (208) 334-2282 PO Box 83720-0080 Phone: (208) 334-2852 Fax: (208) 334-2282 Po Box 4620 Box 5616 ID 82877	

P. O. Box 1629. Post Falls. ID 83877

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	(Type or print cle See instructions												
Lobbyist	's name and permanent bus	ness address				Da	ite p	orepared		Peri	od c	overed	
	ger Seiber/CapitolW	est										month end	ding
	O. Box 953 ise, ID 83701							2/5/07		(1)	1o.)	(Day)	(Yr.)
БО	ise, ID 63701										1	31	07
Item 1	Totals of all report	able expendito	ires made o	r incurred	l by Lobb	yist o	r by	/ Lobbyist's Empl	oyer or	behalf of Lo	bby	rist's Employ	yer.
Reimbu	tegory of Expenditure ursed Personal Living and Trave		mount for		onate amou at bottom			buted by each empl	oyer (I	dentify emplo	yers	, under	
•	s Pertaining to Lobbying Activit Not Have to be Reported	y All Ell	ployers	Emp	loyer No	15		Employer No.26	En	nployer No. 3	1	Employer	No. 💉 🎖
Entertai Food an	nment id Refreshment	s		\$	0.0	00	\$	0.00	\$	0.0	2	\$	0.00
Living A	Accommodations						_	AT			_		
Adverti	sing										_		
Travel											_		
Telepho	ne					_	_				_		
Other E	xpenses or Services						_				-		
	Total	s	0.00	s	0.0	00	\$	0.00	s	0.0	0	\$	0.00
*When	The totals of each expen						_						on Page 1.
2	Date Date	Place		onars (55		nount	_	Names of Legisl			_		in Group
-													
	Continued on attached page	(8)				Ite		T					
	INS	TRUCTION	S			3		Em	ployer(s) Name(s) and	Ad	dress(es)	
 -						No. 3	, - 10	daho Prior App	ropria	tion Doctrir	ne A	Assn	
	o should file this form: 617 Idaho Code	Any lobbyist	registered u	nder Sect	ion	NO.4		99 W. Bannock					
	ng deadline: Monthly th for activities of the pa		vithin ten (10) days	of the	No,2		otato Growers O. Box 949,			221	1	
TO	BE FILED WITH:					1							=
		Ben Ysursa				No. 3				9 SW 65th	Ave	e., #372	
		cretary of Stat O Box 83720	e			- 71	L	ake Oswego, (JR 9	/035			
	Bois	e, ID 83720-00		***		No.	۲ ج	Swisher Interna	tional	, Inc.			
	Phone: (208) 334	-2852 Fax:	(208) 334-2	282			4	59 E 16th St	Jacks	onville. FL	32	2206	

Rev. 06/2006

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Ben Ysursa Secretary of State To Be Filed By:

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(Type or print clear See instructions at											
Lobbyist's name and permanent busine				Di	ite p	repared			Period o	covered	
Roger Seiber/CapitolWes P. O. Box 953	st .									month en	ding
P. O. Box 953 Boise, ID 83701						2/5/07			(Mo.)	(Day)	(Yr.)
Boise, ID 63701									1	31	07
Totals of all reportab	le expenditures made o	r incurred t	y Lobb	yist o	r by	Lobbyist's Emplo	oyer on b	ehalf of	f Lobby	yist's Emplo	yer.
Category of Expenditure Reimbursed Personal Living and Travel Expenses Pertaining to Lobbying Activity	*Total Amount for All Employers	Proportion Item 3, at			ge.)	buted by each empl		ntify em	ployers	s, under	
Do Not Have to be Reported	1 ,	Emplo	yer No	x 4		Employer No.216	Emp	loyer No	. 3	Employer	No. 4
Entertainment Food and Refreshment	\$	\$	0.0	00	\$	0.00	\$			\$	
Living Accommodations					_						
Advertising					_						
Travel					_						
Telephone					_						
Other Expenses or Services					_						
		-									
Total	\$0.00	s	0.0	00	\$	0.00	\$	(0.00	\$	0.00
							İ		l		
*When the number of employers you											on Page 1.
The totals of each expendit	Place	ollars (\$50)		gislat mount		Names of Legisl					in Group
Date	11000			mount			, , ,				
Continued on attached page(s)			'								
INST	RUCTIONS			Ite		Em	ployer(s)	Name(s)	and A	ddress(es)	
				6	7						*************************************
Who should file this form: A 67-6617 Idaho Code	ny lobbyist registered u	nder Sectio	n	No		/aste Manager 15 L St., Ste 14		ıcrame	ento, C	CA 95814	ı
				10	1						
Filing deadline: Monthly re month for activities of the past		10) days of	f the	No.		Vine Institute 25 Market St. :	Sta 100	10 Sar	. Eran	ocieco CA	0/10=
1				<u> </u>	-	ZU WAINEL GL.	010 100	o, Gai	iiiali	101300, 07	3410
TO BE FILED WITH:	en Ysursa			No. 3							
	etary of State										
РО	Box 83720										
	ID 83720-0080 852 Fax: (208) 334-2	282		No. 4	1						
i Holle. (200) 334-2	002 I an. (200) 004-2	202									

4		nal prop	Amount			or for or on behalf of any Legisla Legislator, Public or Executive Off		
em				ion, the number of the Senate				IDENTIFICATION
om t	Code able)	Bill, Re	as supporting or operation or Other ive Ident. Number	Appropriation Bill Number and Section Number	01 02 03 04 05 06 07 08 09	e Subject Agriculture, horticulture, farming, and livestock Amusements, games, athletics and sports Banking, finance, credit and investments Children, minors, youth, senior citizens Church and religion Consumer affairs Ecology, environment, pollution, conservation, zoning, land and water use Education Elections, campaigns, voting, political parties Equal rights, civil rights, minority affairs	18 19 20 21 22 23 24 25 26	Health service, medicine, drugs and controlled substances, health insurance, hospitals Higher education Housing, construction, codes Insurance (excluding health insurance) Labor, salaries and wages, collective bargaining Law enforcement, courts, judges, crimes, prisons License, permits Liquor Manufacturing, distribution and services Natural resources, forest and forest products, fisheries, mining and mining products
					11 12 13 14 15 16	Government, financing, taxation, revenue, budget, appropriations, bids, fees, funds Government, county Government, federal Government, municipal Government, special districts Government, state	27 28 29 30 31	Public lands, parks, recreation Social insurance, unemployment insurance, public assistance, workmen's compensation Transportation, highways, streets and roads Utilities, communications, televisions, radio, newspaper, power, CATV, gas Other (please specify)
_	bid or t		ss, financial service	ision, procurement, contract es or bond lobbyist was	,	correct statement in accordance v	•	•